

Middleton & Reutlinger
2500 Brown & Williamson Tower
Louisville, Kentucky 40202-3410

PHONE: (502) 584-1135
FAX: (502) 561-0442

CONFIDENTIAL AND PRIVILEGED
ATTORNEY CLIENT COMMUNICATION

RECEIVED
CENTRAL FAX CENTER

SEP 22 2003

BEST AVAILABLE COPY

The information contained in this facsimile message is the property of Middleton & Reutlinger. If you are not the intended recipient of this information, any disclosure, copying, distribution, or the taking of any action in reliance on this information, is strictly prohibited. If you have received this message in error, please notify us immediately to arrange for its return. Thank you.

TO: U.S. Patent and Trademark Office
Examiner: Dionne A. Walls Group: 1731
Fax #703-872-9310

FROM: Suzan J. Hixon, Reg. No. 54,171

DATE: September 16, 2003

PAGES: 30 in total (including cover sheet)

RE: U.S. Patent Application No. 10/040,072

Remarks: This facsimile is a response to the office action having a mailing date of May 19, 2003.

OFFICIAL

Enclosed is:

- (1) Transmittal Form;
- (2) Amendment B;
- (3) Extension of Time Request;
- (4) Fee Transmittal Form;
- (5) Credit Card Payment Form.

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8

I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office on the date shown below.

Lynn Minton, Paralegal
Person Signing

Signature

9-18-2003
Date

PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Application Number	10/040,072
Filing Date	10/23/2001
First Named Inventor	GRZONKA
Art Unit	1731
Examiner Name	WALLS
Attorney Docket Number	BW-419-2

Total Number of Pages in This Submission

ENCLOSURES (Check all that apply)☒ Fee Transmittal Form☒ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Response to Missing Parts/Incomplete Application☐ Response to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application
☐ Power of Attorney, Revocation
☐ Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) _____

Remarks

☐ After Allowance communication to Technology Center (TC)☐ Appeal Communication to Board of Appeals and Interferences
☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please identify below):

FACSIMILE TRANSMITTAL

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name SUZAN J. HIXON, REG. NO. 54,171

Signature

Date

9-18-2003

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name

LYNN MINTON

Signature

Date

9-18-2003

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (08-03)

Approved for use through 07/31/2008, OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

Complete if Known

Application Number	10/040,072
Filing Date	10/23/2001
First Named Inventor	GRZONKA
Examiner Name	WALLS
Art Unit	1731
Attorney Docket No.	BW-419-2

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:
 Deposit
Account
Number

 Deposit
Account
Name

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) during the pendency of this application
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$ 0)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below		Fee Paid	
Independent		-20** =		X			
Multiple Dependent		-3** =		X			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim. If not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)					(\$ 0)

**or number previously paid, if greater. For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110.00
1252	410	2252	205	Extension for reply within second month	
1253	830	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	260	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or release)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1808	180	1808	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 110.00)

SUBMITTED BY

Name (Print/Type) SUZAN J. HIXON

Registration No. (Attorney/Agent)

54,171

(Complete if applicable)

Telephone (502) 584-1130

Signature

Date 9-18-2003

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Received from <502 561 0442> at 9/18/03 11:13:42 AM [Eastern Daylight Time] pm, call 1-800-PTO-9199 and select option 2.

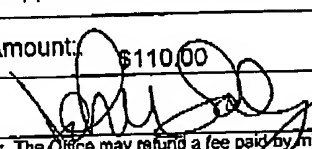
PTO-2038 (02-2000)

Approved for use through 01/31/2003. OMB 0651-0043

United States Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to collection of information unless it displays a valid OMB control number.

UNITED STATES PATENT & TRADEMARK OFFICE**Credit Card Payment Form****Please Read Instructions before Completing this Form****Credit Card Information**

Credit Card Type:	Visa	MasterCard	American Express	Discover
Credit Card Account #:	3725 064238 22002			
Credit Card Expiration Date:	04/06			
Name as it Appears on Credit Card:	JOHN F. SALAZAR			
Payment Amount:	\$110.00			
Signature:			Date: 9-18-2003	
<small>Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.28). Refund of a fee paid by credit card will be via credit to the credit card account. Service Charge: There is a \$0.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21 (m)).</small>				

Credit Card Billing Address

Street Address 1:	8501 AUTUMN RIDGE COURT		
Street Address 2:			
City:	LOUISVILLE		
State	KENTUCKY	Zip/Postal Code:	40242
Country:	USA		
Daytime Phone #:	502-584-1134	Fax #:	502-561-0442

Request and Payment Information**Description of Request and Payment Information****PAYMENT OF EXTENSION OF TIME**

Patent Fee	Patent Maintenance Fee	Trademark Fee	Other Fee
Application No. 10/040,072	Application No.	Serial No.	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No. BW-419-2		Identify or Describe Mark	

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent & Trademark Office will not be liable in the event that the credit card number becomes public knowledge.